# Introduction

# **Objectives**

# **Objectives Legend**

C=Cognitive A=Affective P=Psychomotor

- 1 = Knowledge level
- 2 = Application level
- 3 = Problem-solving level

# **Cognitive Objectives**

At the completion of this lesson, the First Aid student will be able to:

- 1-1.1 Discuss the components of Emergency Medical Services (EMS) systems. (C-1)
- 1-1.2 Differentiate the roles and responsibilities of the First Aider from other out-of-hospital care providers. (C-3)

# **Affective Objectives**

At the completion of this lesson, the First Aid student will be able to:

1-1.3 Accept and uphold the responsibilities of a First Aider in accordance with the generally recognized standards of care. (A-3)

# **Psychomotor Objectives**

No psychomotor objectives identified.

# **Preparation**

#### **Motivation:**

The first link in the Emergency Medical Services (EMS) system is the First Aider. Prompt, properly administered first aid care can make the difference between life and death, rapid versus prolonged recovery and temporary versus permanent disability. The curriculum is designed to assist instructors in producing First Aiders that are knowledgeable and capable of rendering effective emergency care prior to arrival of professional responders.

# **Prerequisites:**

None

#### **Materials**

# **AV** Equipment:

Utilize various audio-visual materials relating to first aid. The continuous development of new audio-visual materials relating to first aid requires careful review to determine which best meet the needs of the program. Materials should be edited to ensure that the

objectives of these guidelines are met.

## **Equipment:**

None required

# **Recommended Minimum Time to Complete:**

See page 12 of Instructor's Course Guide

#### Presentation

- I. Course Overview
  - A. Course description and expectations
  - B. Advancement other training opportunities
- II. The Emergency Medical Services System and the First Aider
  - A. Overview of the Emergency Medical Services system
    - 1. Access to the emergency medical services system
      - a. 9-1-1
        - (1) Basic
        - (2) Enhanced 9-1-1
      - b. Non 9-1-1
      - c. Emergency Medical Dispatch
        - (1) In some EMS systems, besides dispatching EMS to the scene dispatchers are specially trained as Emergency Medical Dispatchers (EMD).
        - (2) An EMD will; calm the caller and keep them on the line (when possible), collect additional information, and provide pre-arrival instructions to the caller on how to perform first aid until EMS arrives.
    - 2. Emergency response plans specific to occupation and location.
    - 3. Levels of training
      - a. First Aid
      - b. First Responder
      - c. EMT-Basic
      - d. EMT-Intermediate
      - e. EMT-Paramedic
    - 4. Brief overview of the local EMS system
    - 5. The chain of survival and the EMS system
      - a. Weak links in the chain lower survival rates
      - b. Early access Phone first/fast
      - c. Early BLS/CPR
      - d. Early defibrillation
      - e. Early advanced cardiac life support (ACLS)
  - B. Roles of the First Aider
    - 1. Personal, ill or injured person, and bystander safety

- 2. Gaining access to the ill or injured person
- 3. First Aid assessment of the ill or injured person to identify life threatening conditions
- 4. Continuation of care through EMS resources
- 5. Emergency care based on assessment findings
- 6. Liaison with public safety workers
  - a. Local law enforcement
  - b. State and federal law enforcement
  - c. Fire departments
  - d. EMS Providers
- C. Responsibilities of the First Aider
  - 1. Personal health and safety
  - 2. Maintain caring attitude reassure and comfort ill or injured person, family, and bystanders while awaiting additional EMS resources
  - 3. Maintain composure
  - 4. Maintain up-to-date knowledge and skills
    - a. Continuing education
    - b. Refresher courses
  - 5. Put ill or injured person's needs as a priority without endangering self.

# **Application**

## Procedural (How)

None identified for this lesson.

### Contextual (When, Where, Why)

The student will use this information throughout the course to enhance his/her understanding and provide direction for the First Aider's relationship to the EMS system. The lesson will provide the student with a road map for learning the skill and knowledge domains of First Aid. This lesson sets the foundation for the remaining teaching/learning process. A positive, helpful attitude presented by the instructor is essential to assuring a positive, helpful attitude from the student.

#### **Student Activities**

## **Auditory (Hearing)**

- 1. Students will hear what they can expect to receive from the training program.
- 2. Students will hear the specific expectations of the training program.
- 3. Students will hear the instructor present information on the local EMS system.

# Visual (Seeing)

- 1. Students will see visual materials explaining the components of the EMS system, First Aid level of care and the First Aider's roles and responsibilities.
- 2. Students will receive handouts.

### **Kinesthetic (Doing)**

- 1. Students will complete any necessary course paperwork.
- 2. Students will indicate if they will require/request assistance during the course based on the Americans with Disabilities Act. Additionally, students will provide the necessary documentation to support the requirements/request.

### **Instructor Activities**

- Facilitate discussion and supervise completion of paperwork as necessary.
- Reinforce student progress in cognitive, affective, and psychomotor domains.
- Redirect students having difficulty with content.

#### **Evaluation**

Evaluate the actions of First Aid students during role play, practice or other skill stations to determine their comprehension of the cognitive and affective objectives and reasonable proficiency with the psychomotor objectives.

### Remediation

Identify students or groups of students who are having difficulty with this subject content.

#### **Enrichment**

# The Well-Being of the First Aider

# **Objectives**

# **Objectives Legend**

C=Cognitive A=Affective P=Psychomotor

- 1 = Knowledge level
- 2 = Application level
- 3 = Problem-solving level

# **Cognitive Objectives**

At the completion of this lesson, the First Aid student will be able to:

- 1-2.1 Discuss possible emotional reactions that the First Aider may experience when faced with trauma, illness, death, and dying. (C-1)
- 1-2.2 Discuss the possible reactions that others may exhibit when confronted with death and dying. (C-1)
- 1-2.3 Explain the need to determine scene safety. (C-2)
- 1-2.4 Discuss the importance of body substance isolation. (BSI) (C-1)
- 1-2.5 Describe the steps the First Aider should take for personal protection from bloodborne pathogens. (C-1)
- 1-2.6 Describe the personal protective equipment necessary for exposure to bloodborne pathogens. (C-1)

# **Affective Objectives**

At the completion of this lesson, the First Aid student will be willing to:

- 1-2.7 Help others to understand the importance of personal protection from bloodborne pathogens. (A-2)
- 1-2.8 Demonstrate compassion when caring for any ill or injured person with illness or injury. (A-2)
- 1-2.9 Place the interests of the ill or injured person as the foremost consideration when making any and all emergency care decisions. (A-3)

# **Psychomotor Objectives**

At the completion of this lesson, the First Aid student will be able to:

1-2.10 Given a scenario with potential infectious exposure, the First Aider will use appropriate personal protective equipment. At the completion of the scenario, the First Aider will properly remove and discard the protective garments. (P-1, 2)

# **Preparation**

#### **Motivation:**

First Aiders may encounter stressful situations involving emergency medical care. These range from major injury and/or illness to death. First Aiders may be confronted with angry, scared, violent, seriously injured or ill people. This lesson emphasizes the emotional aspects of providing first aid. Additionally, personal safety will be discussed. It is important to realize that the safety and well-being of the First Aider must come before that of the ill or injured person. A first aider who is injured as a result of attempting to help is certainly of no benefit to a victim of illness or injury.

## **Prerequisites:**

None

#### **Materials**

## **AV Equipment:**

Utilize various audio-visual materials relating to first aid. The continuous development of new audio-visual materials relating to first aid requires careful review to determine which best meet the needs of the program. Materials should be edited to ensure that the objectives of these guidelines are met.

#### **Equipment:**

Eye protection, gloves, masks.

#### **Recommended Minimum Time to Complete:**

See page 12 of Instructor's Course Guide

#### **Presentation**

II.

- I. Emotional Aspects of Emergency Medical Care
  - A. Stressful situations
    - 1. Examples of situations that may produce a stress response
    - 2. The First Aider will experience personal stress as well as encounter ill or injured persons and bystanders in severe stress.
  - B. Critical incident stress The normal stress response to abnormal circumstances Body Substance Isolation (BSI)
  - A. First Aiders must be aware of the risks associated with emergency medical care.
    - 1. Barrier devices should be used when ventilating an ill or injured person.
    - 2. Personal protective equipment should be utilized as needed or required by the local system.
  - B. First Aiders may be exposed to infectious diseases when treating ill or injured persons.

- C. OSHA/State regulations regarding BSI is employer responsibility.
- D. Infection Control
  - 1. Techniques to prevent disease transmission
    - a. Hand-washing/personal hygiene
    - b. Equipment replacement or disposal.
  - 2. Body substance isolation
    - a. Eye protection
    - b. Gloves (vinyl or latex, synthetic)
    - c. Clothing change if clothing is contaminated.
    - d. Masks Surgical/dust particle type for possible blood splatter (worn by care provider)
    - e. Improvised techniques for BSI.
    - f. Requirements and availability of specialty training
- E. Statutes/regulations reviewing notification and testing in an exposure incident report exposure to employer immediately

### III. Scene Safety

- A. Scene safety
  - 1. Definition an assessment of the scene and surroundings that will provide valuable information to the First Aider and will help ensure the well-being of the First Aider.
  - 2. Personal protection Is it safe to approach the ill or injured person?
  - 3. Protection of the ill or injured person environmental considerations
  - 4. Protection of bystanders do not let the bystander become ill or injured
  - 5. If the scene is unsafe do not enter.

# Application

# Procedural (How)

1. The First Aider will know how to access additional information on hazardous materials and infectious disease exposure, notification and follow-up.

# Contextual (When, Where, Why)

- 1. The First Aider will use the aspects of scene safety and personal protection.
- 2. This lesson should provide incentive to seek out continuing education programs relative to personal safety during hazardous material incidents, rescue situations, and/or other special situations that may be occupationally required.
- 3. If the First Aider fails to develop and use personal safety skills serious injury or death may result.
- 4. The well-being of the First Aider depends upon the ability to recognize that stressful situations do occur. Early recognition and consultation with an appropriately licensed mental health professional may prevent more serious problems.

### **Student Activities**

### **Auditory (Hearing)**

1. The student should hear information regarding dealing with the emotional stress that may result from performing first aid care.

### Visual (Seeing)

- 1. The student should see various visual representations of scenes requiring personal protection.
- 2. The student should see various visual representations of personal protection clothing as required by occupation.
- 3. The student should see the gloves, masks, and eye protection associated with body substance isolation (BSI).

# **Kinesthetic (Doing)**

- 1. The student should practice assessment of the scene and surroundings that will help ensure the well-being of the First Aider.
- 2. The student should practice improvised techniques for BSI.

#### **Instructor Activities**

- Facilitate discussion and supervise practice.
- Reinforce student progress in cognitive, affective, and psychomotor domains.
- Redirect students having difficulty with content.

#### **Evaluation**

Evaluate the actions of the First Aid students during role play, practice or other skill stations to determine their comprehension of the cognitive and affective objectives and reasonable proficiency with the psychomotor objectives.

### Remediation

Identify students or groups of students who are having difficulty with this subject content.

#### **Enrichment**

# **Legal and Ethical Issues**

# **Objectives**

# **Objectives Legend**

C=Cognitive A=Affective P=Psychomotor

- 1 = Knowledge level
- 2 = Application level
- 3 = Problem-solving level

# **Cognitive Objectives**

At the completion of this lesson, the First Aid student will be able to:

- 1-3.1 Define the First Aid scope of care. (C-1)
- 1-3.2 Be familiar with statutes and regulations in your state regarding First Aiders. (C-1)
- 1-3.3 Define consent and discuss the methods of obtaining consent. (C-1)
- 1-3.4 Differentiate between expressed and implied consent. (C-3)
- 1-3.5 Discuss the issues of abandonment, negligence, and battery and their implications to the First Aider. (C-1)
- 1-3.6 State the First Aider's moral and ethical (but not legal) obligation to provide assistance. (C-1)
- 1-3.7 Explain the importance of ill or injured person confidentiality. (C-1)

# **Affective Objectives**

No Affective objectives identified.

# **Psychomotor Objectives**

No psychomotor objectives identified.

# **Preparation**

#### **Motivation:**

Legal and ethical issues are an important element of First Aid care. Should a First Aider stop and treat an automobile crash victim? Should information be released to an attorney or the media? Can a child with a broken arm be treated even though the parents are not present and/or only the child care provider is around? These and otherlegal and ethical questions may face the First Aider. Information will be presented in this lesson to address these legal and ethical questions.

### **Prerequisites:**

None.

### Materials

## AV Equipment:

Utilize various audio-visual materials relating to first aid. The continuous development of new audio-visual materials relating to first aid requires careful review to determine which best meet the needs of the program. Materials should be edited to ensure that the objectives of these guidelines are met.

## **Equipment:**

None required.

# **Recommended Minimum Time to Complete:**

See page 12 of Instructor's Course Guide

#### **Presentation**

#### **Declarative (What)**

- I. Scope of Care
  - A. Responsibilities to the ill or injured person.
    - 1. Provide for the well-being of the ill or injured person by rendering necessary interventions outlined in the scope of care.
  - B. Moral and Ethical responsibilities
    - 1. Accept a humane responsibility to perform first aid for fellow human beings in time of crisis regardless of age, gender, race, ethnicity or socioeconomic status.
    - 2. Make the physical/emotional needs of the ill or injured person a priority.
    - 3. Practice of skills to a level of reasonable proficiency.
    - 4. Attend continuing education/refresher programs.

#### II. Consent

- A. The acceptance of care.
- B. An ill or injured person has the right to make decisions regarding care.
- C. A responsive ill or injured person must consent to receive first aid.
- D. Types of consent
  - 1. Expressed.
    - a. Verbal consent obtained from every responsive injured or ill adult before rendering care.
    - b. Methods of obtaining consent
      - (1) Identify yourself
      - (2) Inform the ill or injured person of your level of training

## 2. Implied

- a. Consent is assumed from the unresponsive ill or injured person requiring emergency intervention
- b. Based on the assumption that the unresponsive ill or injured person would consent to life saving interventions

# E. Children (Optional)

- 1. Consent for first aid must be obtained from a parent or legal guardian.
- 2. When life-threatening situations exist and parent or legal guardian is not available for consent, first aid care should be rendered based on implied consent.

#### III. Refusals

- A. Adult ill or injured persons have the right to refuse first aid.
- B. The ill or injured person may withdraw from first aid care at any time. Example: an unresponsive ill or injured person regains responsiveness and refuses care.
- C. When in doubt, err in favor of providing care.
- D. The First Aider should consider activating EMS to evaluate the ill or injured person.
- IV. Specific statutes and regulations regarding first aid in your state
  - A. Good Samaritan Laws
  - B. Occupational Regulations (OSHA, Bloodborne Pathogens, etc.)
- V. Assault/Battery Attempting to provide care when the ill or injured person has refused.
- VI. Abandonment Terminating care of the ill or injured person without insuring that care will continue at the same level or higher.
- VII. Negligence Deviation from the generally recognized standard of care resulting in further injury to the ill or injured person.

# **Application**

#### Procedural (How)

None identified for this lesson.

#### Contextual (When, Where, Why)

Legal and ethical issues must be considered in first aid care. Decisions to treat or not treat an ill or injured person requires a knowledge of current state and local legislation. Up-to-date information on issues such as negligence, battery, confidentiality, consent and refusal of first aid is important for the First Aider.

#### Student Activities

#### **Auditory (Hearing)**

1. Students should hear Good Samaritan laws.

#### Visual (Seeing)

1. Students should see visual representations relating to negligence, abandonment, battery, duty to act and consent.

# **Kinesthetic (Doing)**

1. Students should review scenarios involving legal and ethical situations that occur in first aid situations (including consent, abandonment, battery and negligence).

### **Instructor Activities**

- Facilitate discussion and supervise practice.
- Reinforce student progress in cognitive, affective, and psychomotor domains.
- Redirect students having difficulty with content.

### **Evaluation**

Evaluate the actions of First Aid students during role play, practice or other skill stations to determine their comprehension of the cognitive and affective objectives and reasonable proficiency with the psychomotor objectives.

### Remediation

Identify students or groups of students who are having difficulty with this subject content.

### **Enrichment**

# The Human Body

Note: This lesson be may taught as a separate module (as presented here), or incorporated into individual modules where indicated (see Instructor's Course Guide).

# **Objectives**

# **Objectives Legend**

C=Cognitive A=Affective P=Psychomotor

- 1 = Knowledge level
- 2 = Application level
- 3 = Problem-solving level

# **Cognitive Objectives**

At the completion of this lesson, the First Aid student will be able to:

- 1-4.1 Describe the basic anatomy and function of the respiratory system. (C-1)
- 1-4.2 Describe the basic anatomy and function of the circulatory system. (C-1)
- 1-4.3 Describe the basic anatomy and function of the muscles and bones. (C-1)
- 1-4.4 Describe the basic components and function of the nervous system. (C-1)

### **Affective Objectives**

No affective objectives identified.

#### **Psychomotor Objectives**

No psychomotor objectives identified.

# Preparation

#### **Motivation:**

To perform adequate initial and physical assessments, the First Aider should be familiar with the basic anatomy of the human body. This information will provide a background on which the First Aider can build the essentials of quality initial and physical assessments.

### **Prerequisites:**

None

#### **Materials**

#### **AV** Equipment:

Utilize various audio-visual materials relating to first aid. The continuous development of new audio-visual materials relating to first aid requires careful review to determine which best meet the needs of the program. Materials should be edited to ensure that the

objectives of these guidelines are met.

## **Equipment:**

None

## **Recommended Minimum Time to Complete:**

See page 12 of Instructor's Course Guide

#### **Presentation**

- I. Body Systems
  - A. The Muscles and bones system
    - 1. Function
      - a. Gives the body shape
      - b. Protects vital internal organs
    - 2. Components
      - a. Skull houses and protects the brain
      - b. Face
      - c. Spinal Column
      - d. Thorax
      - e. Pelvis
      - f. Lower extremities
      - g. Upper extremities
      - h. Joints where bones connect to other bones
    - 3. The Muscular System
      - a. Give the body shape.
      - b. Protect internal organs.
      - c. Provide for movement.
  - B. The Respiratory system
    - 1. Function
      - a. Deliver oxygen to the body
      - b. Remove carbon dioxide from the body
    - 2. Components/anatomy
      - a. Nose and mouth
      - b. Epiglottis a leaf-shaped structure that prevents food and liquid from entering the trachea during swallowing.
      - c. Diaphragm
    - 3. Physiology
      - a. Diaphragm moves down, chest moves out, drawing air into the lungs (inhalation)
      - b. Exchange of oxygen and carbon dioxide in the lungs
      - c. Diaphragm moves up causing air to exit the lungs (exhalation)
    - 4. Infant and Child Considerations (optional)

- a. All structures are smaller and more easily obstructed
- b. Infants and children's tongues take up proportionally more space in the mouth
- c. Trachea more flexible
- d. Primary cause of cardiac arrest is respiratory arrest.

# C. The Circulatory system

- 1. Function
  - a. Deliver oxygen and nutrients to the tissues
  - b. Remove waste products from the tissues
- 2. Components/Anatomy
  - a. Heart
  - b. Arteries
    - (1) Carry blood away from the heart to the rest of the body.
    - (2) Major arteries
      - (a) Carotid
      - (b) Femoral
      - (c) Radial
      - (d) Brachial
    - (3) Capillaries
      - (a) Tiny blood vessels that connect arteries to veins
      - (b) Found in all parts of the body
      - (c) Allow for the exchange of oxygen and carbon dioxide
    - (4) Veins vessels that carry blood back to the heart
    - (5) Blood
      - (a) Fluid of the circulatory system
      - (b) Carries oxygen and carbon dioxide
- 3. Physiology
  - a. Left ventricle contracts, sending a wave of blood through the arteries.
  - b. Pulse can be felt anywhere an artery passes near the skin surface and over a bone.
    - (1) Carotid
    - (2) Femoral
    - (3) Radial
    - (4) Brachial
- D. The Nervous system
  - 1. Function
    - a. Controls the voluntary and involuntary activity of the body.
    - b. Provides for higher mental function (thought, emotion)
  - 2. Components/Anatomy
    - a. Brain located within the skull.
    - b. Spinal cord located within the spinal column
    - c. Peripheral nervous system

#### E. Skin

- 1. Function
  - a. Protects the body from the environment, bacteria and other organisms.
  - b. Helps regulate the temperature of the body.

- c. Prevents dehydration
- d. Senses heat, cold, touch, pressure and pain; transmits this information to the brain and spinal cord.

# Application

## Procedural (How)

None identified for this lesson.

#### Contextual (When, Where, Why)

The First Aider should also have an awareness of the basic components of the body.

Knowledge obtained in this lesson will be beneficial in other modules throughout these guidelines.

### **Student Activities**

### **Auditory (Hearing)**

1. The student should hear descriptions of the various components of the human body.

## Visual (Seeing)

1. The students should see visual representations of the human body.

### **Kinesthetic (Doing)**

1. The students should identify various structures of the human body.

#### **Instructor Activities**

Facilitate discussion and supervise practice.

Reinforce student progress in cognitive, affective, and psychomotor domains.

Redirect students having difficulty with content.

#### **Evaluation**

Evaluate the actions of First Aid students during role play, practice or other skill stations to determine their comprehension of the cognitive and affective objectives and reasonable proficiency with the psychomotor objectives.

#### Remediation

Identify students or groups of students who are having difficulty with this subject content.

#### **Enrichment**

# Moving and Positioning of III or Injured Persons

# **Objectives**

# **Objectives Legend**

C=Cognitive A=Affective P=Psychomotor

- 1=Knowledge level
- 2=Application level
- 3=Problem-solving level

# **Cognitive Objectives**

At the completion of this lesson, the First Aid student will be able to:

- 1-5.1 Define body mechanics. (C-1)
- 1-5.2 Discuss the guidelines and safety precautions that need to be followed when lifting an ill or injured person. (C-1)
- 1-5.3 Describe the indications for an emergency move. (C-1)

# **Affective Objectives**

At the completion of this lesson, the First Aid student will be able to:

- 1-5.4 Explain the reason for properly lifting and moving ill or injured persons. (A-3)
- 1-5.5 Explain the reasons for an emergency move. (A-3)

# **Psychomotor Objectives**

At the completion of this lesson, the First Aid student will be able to:

1-5.6 Demonstrate an emergency move. (P-1,2)

# **Preparation**

#### **Motivation:**

First Aiders may be injured if they attempt to lift or move ill or injured persons improperly.

### **Prerequisites:**

None

First Aiders may be injured if they attempt to lift or move ill or injured persons improperly.

#### **Materials**

## **AV Equipment:**

Utilize various audio-visual materials relating to first aid. The continuous development of new audio-visual materials relating to first aid requires careful review to determine which best meet the needs of the program. Materials should be edited to ensure that the objectives of these guidelines are met.

## **Equipment:**

None required.

# **Recommended Minimum Time to Complete:**

See page 12 of Instructor's Course Guide

#### **Presentation**

- I. Role of the First Aider
  - A. Moving ill or injured persons that are in immediate danger
  - B. Position ill or injured persons to prevent further injury
  - C. Assist other EMS responders in lifting and moving
- II. Body Mechanics/Lifting Techniques
  - A. Safety precautions
    - 1. Use legs, not back, to lift.
    - 2. Keep weight as close to body as possible.
  - B. Guidelines for lifting
    - 1. Consider weight of ill or injured person and the need for help.
    - 2. Know physical ability and limitations.
    - 3. Lift without twisting.
    - 4. Have feet positioned properly.
    - 5. Communicate clearly and frequently with assistants.
- III. Principles of Moving Ill or injured persons
  - A. General considerations
    - 1. An ill or injured person should be moved immediately (emergency move) only when:
      - a. There is an immediate danger to the ill or injured person if not moved.
      - b. Life-saving care cannot be given because of the ill or injured person's location or position, e.g., a cardiac arrest victim sitting in a chair or lying on a bed.
    - 2. If there is no threat to life, the ill or injured person should be moved by the EMS crew.
  - B. Emergency moves
    - 1. The greatest danger in moving an ill or injured person quickly is the possibility of aggravating a spine injury.

- 2. In an emergency, every effort should be made to pull the ill or injured person in the direction of the long axis of the body to provide as much protection to the spine as possible.
- 3. It is impossible to remove an ill or injured person from a vehicle quickly and at the same time provide much protection to the spine.
- 4. If the ill or injured person is on the floor or ground, he/she can be moved by:
  - a. Pulling on the ill or injured person's clothing in the neck and shoulder area.
  - b. Putting the ill or injured person on a blanket and dragging the blanket.
  - c. Putting the First Aider's hands under the ill or injured person's armpits (from the back), grasping the ill or injured person's forearms and dragging the ill or injured person.
  - d. Never pull the ill or injured person's head away from the neck and shoulders.
- C. Ill or injured person positioning
  - 1. An unresponsive ill person without trauma should be moved into the recovery position by rolling the ill person onto his/her side (preferably the left).
  - 2. An injured person with trauma should not be moved until EMS resources can evaluate and stabilize the ill or injured person.
  - 3. An ill or injured person experiencing pain or discomfort or difficulty breathing should be allowed to assume a position of comfort.
  - 4. An ill or injured person who is nauseated or vomiting should be allowed to remain in a position of comfort; however, the First Aider should be positioned appropriately to manage the airway.

# **Application**

### Procedural (How)

Show examples of situations where emergency moves are appropriate.

Demonstrate emergency moves.

Demonstrate positioning ill or injured persons with different conditions.

Unresponsiveness

Chest pain or discomfort or difficulty breathing

Ill or injured persons who are vomiting or nauseated

#### Contextual (When, Where, Why)

When to move a ill or injured person is determined by both the ill or injured person's condition and the environment in which he/she is found.

#### Student Activities

#### **Auditory (Hearing)**

- 1. The student should hear explanations of body mechanics.
- 2. The student should hear principles of lifting and moving.
- 3. The student should hear indications for emergency moves.

## Visual (Hearing)

The student should see situations where emergency moves are appropriate.

The student should see emergency moves.

The student should see ill or injured persons with different conditions positioned properly.

- 1. The student should hear explanations of body mechanics.
- 2. The student should hear principles of lifting and moving.
- 3. The student should hear indications for emergency moves.

#### Visual (Seeing)

The student should see situations where emergency moves are appropriate.

The student should see emergency moves.

The student should see ill or injured persons with different conditions positioned properly.

- Unresponsiveness
- Chest pain or discomfort or difficulty breathing
- Ill or injured persons who are vomiting or nauseated

## **Kinesthetic (Doing)**

The student should practice determining whether emergency moves are appropriate.

The student should practice emergency moves.

The student should practice positioning ill or injured persons with different conditions.

- Unresponsiveness
- Chest pain or discomfort or difficulty breathing
- Ill or injured persons who are vomiting or nauseated

#### **Instructor Activities**

Facilitate discussion and supervise practice.

Reinforce student progress in cognitive, affective, and psychomotor domains.

Redirect students having difficulty with content

#### **Evaluation**

Evaluate the actions of First Aid students during role play, practice or other skill stations to determine their comprehension of the cognitive and affective objectives and reasonable proficiency with the psychomotor objectives.

#### Remediation

Identify students or groups of students who are having difficulty with this subject content.

#### **Enrichment**